

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Misty For Congress

ADDRESS (number and street)

2420 Fruited Plains Ct

Check if different
than previously
reported. (ACC)

Colorado Springs

CO

80915

2. **FEC IDENTIFICATION NUMBER** ▼

C C00612226

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

CO

05

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 / 28 / 2016in the
State of

CO

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2016

through

M M / D D / Y Y Y Y
06 / 08 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Elizabeth Clare Wilkes

Signature of Treasurer

Elizabeth Clare Wilkes

[Electronically Filed]

Date

M M / D D / Y Y Y Y
06 / 17 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 23

Write or Type Committee Name

Misty For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1736.10	1846.10
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1736.10	1846.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1799.49	2067.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1799.49	2067.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1077.90	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1338.87	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 23

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Misty For Congress

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y
06		08		2016

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

500.00

500.00

(ii) Unitemized.....

1136.10

1246.10

(iii) TOTAL of contributions from individuals ▶

1636.10

1746.10

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

100.00

100.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

1736.10

1846.10

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

970.94

1338.87

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

970.94

1338.87

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

2707.04

3184.97

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 23

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1799.49	2067.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	39.65	39.65
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1839.14	2107.07

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	210.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2707.04
25. SUBTOTAL (add Line 23 and Line 24).....	2917.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1839.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1077.90

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 23
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Misty For Congress

A. Full Name (Last, First, Middle Initial) Actblue Technical Services			Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2016	
Mailing Address PO Box 382110			Transaction ID : SA11AI.4366	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 110.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date		
B. Full Name (Last, First, Middle Initial) Actblue Technical Services			Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2016	
Mailing Address PO Box 382110			Transaction ID : SA11AI.4367	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 282.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date		
C. Full Name (Last, First, Middle Initial) Actblue Technical Services			Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2016	
Mailing Address PO Box 382110			Transaction ID : SA11AI.4368	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date		
SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Misty For Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2016

Transaction ID : SA11AI.4369

Amount of Each Receipt this Period

33.00

☒ Memo Item

Earmarked Contributions

Full Name (Last, First, Middle Initial)

B. Actblue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		01		2016

Transaction ID : SA11AI.4370

Amount of Each Receipt this Period

175.00

☒ Memo Item

Earmarked Contributions

Full Name (Last, First, Middle Initial)

C. Actblue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2016

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period

17.23

☒ Memo Item

Earmarked Contributions

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Misty For Congress

Full Name (Last, First, Middle Initial)

A. Actblue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		15		2016

Transaction ID : SA11AI.4372

Amount of Each Receipt this Period

236.68

☒ Memo Item

Earmarked Contributions

Full Name (Last, First, Middle Initial)

B. Actblue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2016

Transaction ID : SA11AI.4373

Amount of Each Receipt this Period

20.84

☒ Memo Item

Earmarked Contributions

Full Name (Last, First, Middle Initial)

C. Actblue Technical Services

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2016

Transaction ID : SA11AI.4374

Amount of Each Receipt this Period

19.61

☒ Memo Item

Earmarked Contributions

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

×	11a	11b	11c	11d	
	12	13a	13b	14	15

FEC Schedule A (Form 3) (Revised 12/2015)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Misty For Congress

Full Name (Last, First, Middle Initial)

Sylvia Wilkes

Mailing Address 3084 Capstan Way

City

Colorado Springs

State

CO

Zip Code

80906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SA11Al.4132

Amount of Each Receipt this Period

500.00

☐ Memo Item

Donation for Tshirts

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Misty For Congress

A. Full Name (Last, First, Middle Initial) Misty Dawn Plowright		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2016	
Mailing Address 2420 Fruited Plains Ct		Transaction ID : SA11D.4131	
City Colorado Springs	State CO	Zip Code 80915	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C H6CO05233		<input type="checkbox"/> Memo Item <input type="checkbox"/> Petty Cash	
Name of Employer Percient	Occupation Lead Technical Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 716.36		

B. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 23

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Misty For Congress

A. Full Name (Last, First, Middle Initial) Misty Dawn Plowright		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2016	
Mailing Address 2420 Fruited Plains Ct		Transaction ID : SA13A.4168	
City Colorado Springs	State CO	Zip Code 80915	Amount of Each Receipt this Period _____ 389.44
FEC ID number of contributing federal political committee. C H6CO05233		<input type="checkbox"/> Memo Item	
Name of Employer Perficient	Occupation Lead Technical Consultant		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date _____ 616.36		

B. Full Name (Last, First, Middle Initial) Misty Dawn Plowright		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2016	
Mailing Address 2420 Fruited Plains Ct		Transaction ID : SA13A.4167	
City Colorado Springs	State CO	Zip Code 80915	Amount of Each Receipt this Period _____ 49.00
FEC ID number of contributing federal political committee. C H6CO05233		<input type="checkbox"/> Memo Item	
Name of Employer Perficient	Occupation Lead Technical Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 765.36		

C. Full Name (Last, First, Middle Initial) Misty Dawn Plowright		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2016	
Mailing Address 2420 Fruited Plains Ct		Transaction ID : SA13A.4169	
City Colorado Springs	State CO	Zip Code 80915	Amount of Each Receipt this Period _____ 463.50
FEC ID number of contributing federal political committee. C H6CO05233		<input type="checkbox"/> Memo Item	
Name of Employer Perficient	Occupation Lead Technical Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1228.86		

SUBTOTAL of Receipts This Page (optional).....	_____ 901.94
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 23

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Misty For Congress

A. Full Name (Last, First, Middle Initial)
Misty Dawn Plowright
 Mailing Address 2420 Fruited Plains Ct

City State Zip Code
 Colorado Springs CO 80915

FEC ID number of contributing
federal political committee.

C H6CO05233

Name of Employer
 Percipient

Occupation
 Lead Technical Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1248.86

Date of Receipt

M M / D D / Y Y Y Y
 04 30 2016

Transaction ID : SA13A.4171

Amount of Each Receipt this Period

20.00

☐ Memo Item
 First TDOV add on fb

B. Full Name (Last, First, Middle Initial)
Misty Dawn Plowright
 Mailing Address 2420 Fruited Plains Ct

City State Zip Code
 Colorado Springs CO 80915

FEC ID number of contributing
federal political committee.

C H6CO05233

Name of Employer
 Percipient

Occupation
 Lead Technical Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1297.86

Date of Receipt

M M / D D / Y Y Y Y
 05 17 2016

Transaction ID : SA13A.4170

Amount of Each Receipt this Period

49.00

☐ Memo Item
 Campaign Partner month of may monthly

C. Full Name (Last, First, Middle Initial)
 Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

69.00

TOTAL This Period (last page this line number only).....

970.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 23

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Misty For Congress

Full Name (Last, First, Middle Initial)

A. Rush Order Tees

Mailing Address 2727 Commerce Way

Date of Disbursement

M M	D D	Y Y Y Y
04	11	2016

City	State	Zip Code
Philadelphia	PA	19154

Amount of Each Disbursement this Period

389.44

Purpose of Disbursement
Tshirts for State Convention

006

☐ Memo Item

Candidate Name

Misty Dawn PlowrightCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

State: CO District: 05

Transaction ID : SB17.4151

Full Name (Last, First, Middle Initial)

B. Rush Order Tees

Mailing Address 2727 Commerce Way

Date of Disbursement

M M	D D	Y Y Y Y
04	19	2016

City	State	Zip Code
Philadelphia	PA	19154

Amount of Each Disbursement this Period

463.50

Purpose of Disbursement
T shirts for Swag Purchase

006

☐ Memo Item

Candidate Name

Misty Dawn PlowrightCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: CO District: 05

Transaction ID : SB17.4155

Full Name (Last, First, Middle Initial)

c. Tri-Lakes PrintingMailing Address 15706 Jackson Creek Parkway
#120

Date of Disbursement

M M	D D	Y Y Y Y
04	14	2016

City	State	Zip Code
Monument	CO	80132

Amount of Each Disbursement this Period

298.44

Purpose of Disbursement
Rally Signs for the State Convention

004

☐ Memo Item

Candidate Name

Misty For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

State: CO District: 05

Transaction ID : SB17.4153

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1151.38

1151.38

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4109

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Misty Dawn Plowright

Election: 2016

☐ Primary☐ General☒ Other (specify) ▼

Convention

Mailing Address
2420 Fruited Plains Ct

City	State	ZIP Code
Colorado Springs	CO	80915

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="100.00"/>	<input type="text" value="0.00"/>	<input type="text" value="100.00"/>

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 16 / 2016

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4101

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Misty Dawn Plowright

Election: 2016

☐ Primary☐ General☒ Other (specify) ▼

Convention

Mailing Address
2420 Fruited Plains Ct

City	State	ZIP Code
Colorado Springs	CO	80915

Original Amount of Loan

127.92

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

127.92

TERMS

Date Incurred

M 03 / D 18 / Y 2016 Y

Date Due

M M / D D / Y None Y

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

127.92

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4112

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Misty Dawn Plowright

Election: 2016

☐ Primary☐ General☒ Other (specify) ▼

Convention

Mailing Address
2420 Fruited Plains Ct

City	State	ZIP Code
Colorado Springs	CO	80915

Original Amount of Loan

50.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50.00

TERMS

Date Incurred

M 03 / D 20 / Y 2016 Y

Date Due

M M / D D / Y None Y

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Misty Dawn Plowright

Election: 2016

☐ Primary☐ General☒ Other (specify) ▼

Convention

Mailing Address
2420 Fruited Plains Ct

City	State	ZIP Code
Colorado Springs	CO	80915

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="41.01"/>	<input type="text" value="0.00"/>	<input type="text" value="41.01"/>

TERMS

Date Incurred

M 03 / D 27 / Y 2016 Y

Date Due

M M / D D / Y None Y

Interest Rate

 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4111

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Misty Dawn Plowright

Election: 2016

☐ Primary☐ General☒ Other (specify) ▼

Convention

Mailing Address
2420 Fruited Plains Ct

City	State	ZIP Code
Colorado Springs	CO	80915

Original Amount of Loan

49.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

49.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 28 / 2016

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City	State	ZIP Code
------	-------	----------

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

49.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4168

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2016

Misty Dawn Plowright

☐ Primary☐ General☒ Other (specify) ▼

Convention

Mailing Address

2420 Fruited Plains Ct

City

State

ZIP Code

Colorado Springs

CO

80915

Original Amount of Loan

389.44

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

389.44

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 11 / 2016

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

389.44

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 20 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4167

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Misty Dawn Plowright

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2420 Fruited Plains Ct

City

State

ZIP Code

Colorado Springs

CO

80915

Original Amount of Loan

49.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

49.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 18 / 2016

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

49.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4169

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Misty Dawn Plowright

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2420 Fruited Plains Ct

City

State

ZIP Code

Colorado Springs

CO

80915

Original Amount of Loan

463.50

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

463.50

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 19 / 2016

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

463.50

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4171

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Misty Dawn Plowright

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2420 Fruited Plains Ct

City

State

ZIP Code

Colorado Springs

CO

80915

Original Amount of Loan

20.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 30 / 2016

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 23 OF 23

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4170

Misty For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Misty Dawn Plowright

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2420 Fruited Plains Ct

City

State

ZIP Code

Colorado Springs

CO

80915

Original Amount of Loan

49.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

49.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 17 / 2016

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

49.00

TOTALS This Period (last page in this line only)..... ►

1338.87

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.